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HDP/SB/21 based on PTO/SB/21 (08-00)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | |
|------------------------|-------------------------|
| Application Number | 10/666,051 (Unofficial) |
| Filing Date | 09/17/2003 |
| First Named Inventor | Stefan Deferme |
| Group Art Unit | Unknown |
| Examiner Name | Unknown |
| Attorney Docket Number | 1316N-001669 |

Total Number of Pages in This Submission 7

ENCLOSURES (check all that apply)

- ☐ Fee Transmittal Form
 - ☐ Fee Attached
- ☐ Amendment / Response
 - ☐ After Final
 - ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/ Incomplete Application
 - ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☒ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please identify below):
Transmittal of Formal Drawings and Return Receipt Postcard

Remarks

The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.

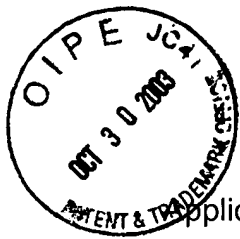
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | | | |
|-------------------------|----------------------------------|---------------|--------------------|----------|--------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name | Michael J. Schmidt | Reg. No. | 34,007 |
| Signature | | | | | |
| Date | Oct 27, 2003 | | | | |

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.

| | | | |
|-----------------------|--------------------|------|--------------|
| Typed or printed name | Michael J. Schmidt | | |
| Signature | | Date | Oct 27, 2003 |



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/666,051 (Unofficial)
Filing Date: 09/17/2003
Applicant: Stefan Deferme
Group Art Unit: Unknown
Examiner: Unknown
Title: STROKE DEPENDENT BYPASS
Attorney Docket: 1316N-001669

Director of The United States Patent and Trademark Office
P.O. Box 1450
Alexandria, Virginia 22313-1450

TRANSMITTAL OF FORMAL DRAWINGS

Sir:

Enclosed for filing are four (4) "Replacement Sheets" including formal drawings (Figs. 1-4) for the above-identified patent application. Applicant respectfully requests that the enclosed FORMAL DRAWINGS replace the most recent drawings filed with the application.

Respectfully submitted,

Date:

Oct 22, 2003

By:

Michael J. Schmidt, Reg. No. 34,007

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